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Approved for use through 09/30/2000. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

Attorney Docket No.	BARNETTE 1	
First Inventor or Application Identifier		James D. Barnette
Title	AN INTERPOLATOR, A RESAMPLER EMPLOYING THE INTERPOLATOR AND METHOD OF INTERPOLATING A SIGNAL ASSOCIATED THEREWITH	
Express Mail Label No.	EL053866891US	

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. <input checked="" type="checkbox"/>	* Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)	5. <input type="checkbox"/> Microfiche Computer Program (Appendix)																													
2. <input checked="" type="checkbox"/>	Specification [Total Pages 79] (preferred arrangement set forth below)	6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)																													
	<ul style="list-style-type: none"> - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 	3. <input checked="" type="checkbox"/>	Drawing(s) (35 U.S.C. 113) [Total Sheets 6]	7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))	4. Oath or Declaration	[Total Pages]	8. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement <input type="checkbox"/> Power of (when there is an assignee) <input type="checkbox"/> Attorney	a. <input type="checkbox"/>	Newly executed (original or copy)	9. <input type="checkbox"/> English Translation Document (if applicable)	b. <input type="checkbox"/>	Copy from a prior application (37 C.F.R. § 1.63(d)) (for continuation/divisional with Box 16 completed)	10. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations	i. <input type="checkbox"/>	DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).	11. <input type="checkbox"/> Preliminary Amendment	12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)			* Small Entity Statement(s) <input type="checkbox"/> Statement filed in prior application, (PTO/SB/09-12) <input type="checkbox"/> Status still proper and desired			13. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)			14. <input type="checkbox"/> Other:			15. <input type="checkbox"/> Other:		
3. <input checked="" type="checkbox"/>	Drawing(s) (35 U.S.C. 113) [Total Sheets 6]	7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))																													
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14. <input type="checkbox"/> Other:																															
15. <input type="checkbox"/> Other:																															

NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:

Continuation Divisional Continuation-in-part (CIP)

of prior application No: _____

Prior application information: Examiner _____

Group / Art Unit: _____

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

Customer Number or Bar Code Label
(Insert Customer No. or Attach bar code label here) or Correspondence address below

Name	Glenn W. Boisbrun			
	Hitt Gaines & Boisbrun, P.C.			
Address	P.O. Box 832570			
City	Richardson	State	Texas	Zip Code
Country		Telephone	(972) 480-8800	Fax (972) 480-8865

Name (Print/Type)	Glenn W. Boisbrun	Registration No. (Attorney/Agent)	39,615
Signature			Date 08/29/2000

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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FEE TRANSMITTAL

for FY 2000

Patent fees are subject to annual revision.

Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12. See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT (\$)

1,464.00

Complete if Known

Application Number	N/A
Filing Date	Herewith
First Named Inventor	James D. Barnette
Examiner Name	N/A
Group / Art Unit	N/A
Attorney Docket No.	BARNETTE 1

METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number **12-2325**Deposit Account Name **Lucent Technologies** Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17

2. Payment Enclosed:

Check Money Order Other

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
105	130	Surcharge - late filing fee or oath	
127	50	Surcharge - late provisional filing fee or cover sheet.	
139	130	Non-English specification	
147	2,520	For filing a request for reexamination	
112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	Requesting publication of SIR after Examiner action	
115	110	Extension for reply within first month	
116	380	Extension for reply within second month	
117	870	Extension for reply within third month	
118	1,360	Extension for reply within fourth month	
128	1,850	Extension for reply within fifth month	
119	300	Notice of Appeal	
120	300	Filing a brief in support of an appeal	
121	260	Request for oral hearing	
138	1,510	Petition to institute a public use proceeding	
140	110	Petition to revive - unavoidable	
141	1,210	Petition to revive - unintentional	
142	1,210	Utility issue fee (or reissue)	
143	430	Design issue fee	
144	580	Plant issue fee	
122	130	Petitions to the Commissioner	
123	50	Petitions related to provisional applications	
126	240	Submission of Information Disclosure Stmt	
581	40	Recording each patent assignment per property (times number of properties)	
146	690	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	690	For each additional invention to be examined (37 CFR § 1.129(b))	
Other fee (specify) _____			
Other fee (specify) _____			

SUBTOTAL (1) (\$)

690.00

2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
50	-20**	= 30	18.00 = 540.00
Independent Claims	6	- 3**	= 3 X 78.00 = 234.00
Multiple Dependent			

**or number previously paid, if greater; For Reissues, see below

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Description
103	18	Claims in excess of 20
102	78	Independent claims in excess of 3
104	260	Multiple dependent claim, if not paid
109	78	** Reissue independent claims over original patent
110	18	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)

774.00

SUBTOTAL (3) (\$)

0.00

Reduced by Basic Filing Fee Paid

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Glenn W. Boisbrun	Registration No. (Attorney/Agent)	39,615	Telephone	(972) 480-8800
Signature				Date	08/29/2000

WARNING:

Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.